

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
FOR USE WITH FORM PTO/SB-13**

SEARCHED

16-2000-DATE

— 100 —

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.						
1					51					
2					52					
3					53					
4					54					
5					55					
6					56					
7					57					
8					58					
9					59					
10					60					
11	1				61					
12					62					
13					63					
14					64					
15					65					
16					66					
17					67					
18					68					
19					69					
20	1				70					
21	L				71					
22					72					
23	1				73					
24					74					
25	1				75					
26	1				76					
27					77					
28	1				78					
29					79					
30	1				80					
31					81					
32	1				82					
33					83					
34	1				84					
35					85					
36	1				86					
37	1				87					
38					88					
39					89					
40					90					
41					91					
42					92					
43					93					
44					94					
45					95					
46					96					
47					97					
48					98					
49					99					
50					100					
TOTAL IND.					TOTAL IND.					
TOTAL DEP.					TOTAL DEP.					
TOTAL CLAIMS					TOTAL CLAIMS					